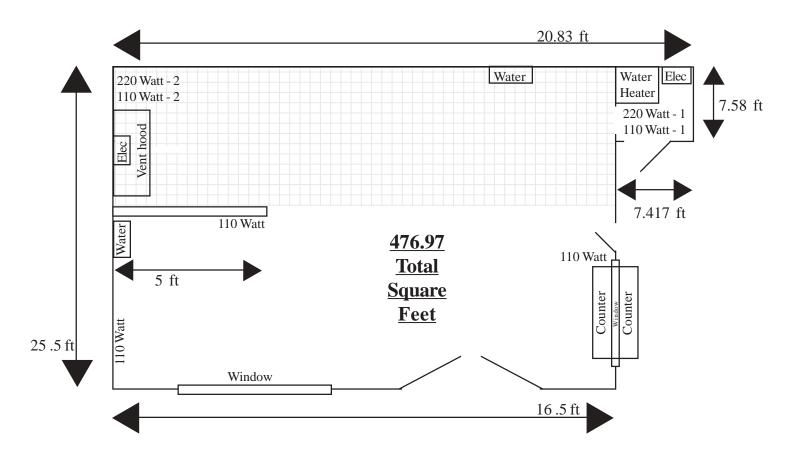
**Shop #9** 



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## The City of Lynchburg, Virginia

301 GROVE STREET, LYNCHBURG, VA 24501 (434) 455-5858 FAX (434) 528-2794

PARKS AND RECREATION DEPARTMENT

## Lynchburg Community Market Permanent Shop Application Shop number 9 - Restaurant

The City of Lynchburg reserves the right to reopen the application process if no vendors are found that meet our needed requirements.

## **Applicant Information** Business Name: \_\_\_\_\_ Owner(s) Name: Business Mailing Address: Owner daytime phone number: **Proposal** If this business is now in operation, please describe the business (include years in operation and current location): Please describe your business proposal for the Lynchburg Community Market, include a general description of your product(s), your target market, how your business compliments the market mix, etc:

Please describe any special requirements that are needed for ventilation system for cooking, electrical services, etc.	your business, such as a
Please describe the improvements needed to the space that y City to fund:	ou are requesting for the
Provide, as an attachment, a sketch of the layout of the space improvements that you will make to the space and will fund:	. Please describe the
Please provide timeline, include estimate of time needed to re shop would open:	
experience in product line of proposed business:	
Please provide a brief background of owner(s), include manag	gement experience and
Please provide details of your operations plan, include hours of commitment, and any logistical needs that City staff should be storage requirements, etc:	

I have read and understand the Lynchburg Community Market Lease Agreement and Community Market Handbook and agree to abide by all rules and policies of the Community Market and lease agreement.	
Owner name	Owner name
Owner signature	Owner signature
Date	Date